

AMENDMENT TRANSMITTAL LETTER				Docket No. 09669/091001																																					
Application No. 10/583,571-Conf. #8880		Filing Date June 19, 2006		Examiner Not Yet Assigned																																					
Art Unit 2137																																									
Applicant(s): Michel Leger et al.																																									
Invention: SECURE TERMINAL																																									
TO THE COMMISSIONER FOR PATENTS																																									
Transmitted herewith is an amendment in the above-identified application.																																									
The fee has been calculated and is transmitted as shown below.																																									
CLAIMS AS AMENDED																																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Claims Remaining After Amendment</th> <th>Highest Number Previously Paid</th> <th>Number Extra Claims Present</th> <th>Rate</th> <th></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>15</td> <td>- 20 =</td> <td>0</td> <td>x 52.00</td> <td>0.00</td> </tr> <tr> <td>Independent Claims</td> <td>2</td> <td>- 3 =</td> <td>0</td> <td>x 220.00</td> <td>0.00</td> </tr> <tr> <td colspan="5">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="5">Other fee (please specify):</td> <td></td> </tr> <tr> <td colspan="5">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</td> <td>0.00</td> </tr> </tbody> </table>							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	15	- 20 =	0	x 52.00	0.00	Independent Claims	2	- 3 =	0	x 220.00	0.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify):						TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate																																					
Total Claims	15	- 20 =	0	x 52.00	0.00																																				
Independent Claims	2	- 3 =	0	x 220.00	0.00																																				
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>																																									
Other fee (please specify):																																									
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00																																				
<input checked="" type="checkbox"/> Large Entity			<input type="checkbox"/> Small Entity																																						
<input type="checkbox"/> No additional fee is required for this amendment.																																									
<input type="checkbox"/> Please charge Deposit Account No. <u>50-0591</u> in the amount of \$ _____ . A duplicate copy of this sheet is enclosed.																																									
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.																																									
<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																									
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>50-0591</u> as described below.																																									
<input type="checkbox"/> Credit any overpayment.																																									
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.																																									
<u>/Jonathan P. Osha/</u> Jonathan P. Osha Attorney/Agent Reg. No.: 33,986			Dated: <u>November 20, 2008</u>																																						
OSHA · LIANG LLP 909 Fannin Street, Suite 3500 Houston, Texas 77010 (713) 228-8600																																									